

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I declare that:

My residence, post office address and citizenship are as stated below next to my name; I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **METHODS FOR TARGETED ELECTROSURGERY ON CONTAINED HERNIATED DISCS** the specification of which X is attached hereto or was filed on as Application No. and was amended on (if applicable).

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, Section 1.56. I claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Country	Application No.	Date of Filing	Priority Claimed Under 35 USC 119
WIPO	PCT/US00/13706	May 17, 2000	Yes <u> X </u> No <u> </u>

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below:

Application No.	Filing Date

I claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, section 1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application No.	Date of Filing	Status
09/316,472	May 21, 1999	<u> </u> Patented <u> X </u> Pending <u> </u> Abandoned
09/295,687	April 21, 1999	<u> </u> Patented <u> X </u> Pending <u> </u> Abandoned
09/054,323	April 2, 1998	<u> </u> Patented <u> X </u> Pending <u> </u> Abandoned
09/268,616	March 15, 1999	<u> </u> Patented <u> X </u> Pending <u> </u> Abandoned
08/990,374	December 15, 1997	<u> X </u> Patented <u> </u> Pending <u> </u> Abandoned
08/485,219	June 7, 1995	<u> X </u> Patented <u> </u> Pending <u> </u> Abandoned
09/026,851	February 20, 1998	<u> </u> Patented <u> X </u> Pending <u> </u> Abandoned
08/690,159	July 18, 1996	<u> X </u> Patented <u> </u> Pending <u> </u> Abandoned

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

John T. Raffle, Reg. No. 38,585

Send Correspondence to: ArthroCare Corporation 595 N. Pastoria Avenue Sunnyvale, California 94085-2936	Direct Telephone Calls to: (Name, Reg. No., Telephone No.) Name: John T. Raffle Reg. No.: 38,585 Telephone: (408) 736-0224
--	---

Full Name of Inventor 1	Last Name LETTICE	First Name JOHN	Middle Name or Initial J.
Residence & Citizenship	City Atherton	State/Foreign Country California	Country of Citizenship United States of America
Post Office Address	Post Office Address 64 Fairview Avenue	City Atherton	State/Country Zip Code California 94027
Full Name of Inventor 2	Last Name KULA, JR.	First Name THOMAS	Middle Name or Initial
Residence & Citizenship	City Los Gatos	State/Foreign Country California	Country of Citizenship United States of America
Post Office Address	Post Office Address 900 Old Mill Pond	City Los Gatos	State/Country Zip Code California 95033
Full Name of Inventor 3	Last Name HOVDA	First Name DAVID	Middle Name or Initial C.
Residence & Citizenship	City Mountain View	State/Foreign Country California	Country of Citizenship United States of America
Post Office Address	Post Office Address 1900 Miramonte Avenue	City Mountain View	State/Country Zip Code California 94040
Full Name of Inventor 4	Last Name WOLOSZKO	First Name JEAN	Middle Name or Initial
Residence & Citizenship	City Mountain View	State/Foreign Country California	Country of Citizenship France
Post Office Address	Post Office Address 1694 Columbia Drive	City Mountain View	State/Country Zip Code California 94040

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 1	Signature of Inventor 2	Signature of Inventor 3
John J. Lettice	Thomas Kula, Jr.	David C. Hovda
Date	Date	Date
Signature of Inventor 4		
Jean Woloszko		
Date		